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BIBDATASHEET

CONFIRMATION NO. 2999

Bib Data Sheet

SERIAL NUMBER 10/611,824	FILING OR 371(c) DATE 06/30/2003 RULE	CLASS 422	GROUP ART UNIT 1723	ATTORNEY DOCKET NO. LIFE-096CON4
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/001,776 10/18/2001 PAT 6,663,835 which is a CON of 09/513,013
 02/25/2000 PAT 6,375,626
 which is a CIP of 09/267,179 03/12/1999 PAT 6,368,563

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 5	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

33072

TITLE

COLLECTION WELL FOR BODY FLUID TESTER

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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